

## Rural General Public Transit Service

NTD ID: \_\_\_\_\_

Rural Transit Provider

Contact Person

Address

Telephone Number

Type of Service Operated (check all that apply)

Fixed Route ☐

Subscription ☐

Deviated Fixed Route ☐

Vanpool ☐

Demand Response ☐

Other ☐

Describe

Service Area (check only one)

Municipal ☐

Multi-county ☐

County ☐

Volunteer Resources (check all that apply)

Volunteer Drivers ☐

Describe

Personal Vehicles in Service ☐

Describe

Number of Active Vehicles  
in Fleet

Number of ADA Accessible  
Vehicles

Annual Operating and  
Administrative Expenses

Operating Revenues

Fare Revenues

Contract Revenues

Federal Operating Assistance

State Operating Assistance

Local Operating Funds

Total Annual Operating Revenues

Annual Capital Costs

Sources of Capital Funds

Federal Capital Assistance

State Capital Assistance

Local Capital Funds

Total Capital Funds

Annual Vehicle Miles

Annual Vehicle Hours

Annual Passenger Trips

Safety

Fatalities

Major Incidents

Major Injuries